LETTERS to the Editor

Further Notes on Curricula

To the Editor: After reviewing Dr. Hulda Thelander's Letter to the Editor, "Medical Curricula: Relevance Then to Now, and Now to Now" California Medicine 113: 96-97, Aug 1970 I felt great relief to know others are expressing methods of reorganizing the "reorganized medical curriculum" to a program that would produce doctors knowledgeable in the true practice of medicine as it evolved in the 1930's and 1940's. I have found that doctors who graduated from medical school during those years are, in the majority, physicians and surgeons who have a knowledge of the whole body rather than subdivision or fractionation of medicine as it tends to exist today. I feel that the four years of my medical school were performed in a fashion equal to those expressed in Dr. Thelander's letter. I believe her recommendations of reducing premedical program to two years is an excellent measure of determining the status of the student as a potential physician and surgeon. This four years is a period of time in a young man's life where his ambitions and energies could be more productively spent for the welfare of himself and his future patients if he were able to actively program his early studies without regard to the ancillary assets of basic education, which is not retained for any productive purpose. A two-year premedical education supplemented by summer jobs in hospitals would seem to upgrade the attitudes and endeavors of the young future doctors.

I concur with all recommendations with the exception of the intern year. It is my feeling that the intern year should not only be maintained, but prolonged to two years, thereby allowing the physician to associate himself in the activity of patient exposure under supervision, and going through the same route twice, but the second time recognizing the mistakes of the first trip.

This would involve two years in premedical basic science, complemented by summer jobs in hospital facilities or related fields, an intensive four year medical education with the first two vears of basic sciences being restored, and the second two years of clerkship patient exposure, and finally two years of internship to expose the "muscles" they have developed. A total of eight years from start to finish in lieu of nine years as it now exists for the average student today, a savings of one year in a young man's life with increased knowledge during the process. I would like to add that beyond the internship doctors be required to participate in general practice for a period of not less than three years before being accepted to residencies so they could express and relate all they have learned from the people they have served. This would give the specialty boards an opportunity to select not only on the basis of scholastic abilities but on the basis of personality and community reputation for a better rounded doctor.

People receiving care today, are for the most part, receiving care on a fractionated and subdivided basis. The requirement of general practice for three years would allow the people to receive care from a better trained doctor. In addition, the endeavors and ambitions of the future specialists would be more fruitful for they would have selected their specialty not because of unknown ambitions but on the basis of judgment and experience. This in essence would provide more doctors to treat the patient as a person.

I sincerely wish to congratulate Dr. Thelander for her intent and endeavors. For a doctor of her years of teaching and practice to endeavor a second review of the medical curriculum without personal gain or ambitions is indeed honorable.

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One Mental Health Approach To Fostering World Peace

To the Editor: A point of view is needed which will allow aggressive individuals who ultimately battle and climb to position of leadership in government to deal rationally and constructively with problems that continually threaten the peace of the world. The current conflict in Vietnam (and most recently in Cambodia) may be taken as a frame of reference. Since we are in the midst of this conflagration, I will not waste time discussing how this might have been prevented. Rather the thrust of this discussion will be how to provide a reasonable basis for removing ourselves from this unwanted situation and how to prevent plunging into similar episodes in the future.

There are several basic problems which we must understand and with which we must deal. These problems are psychological and ones of survival. Let me dispose first of the survival problem that arises from confrontation between nations. The assumption is made that the aggressive nature of man as manifested in government leaders will always operate in such a fashion as to expand into and control environments and communal organizations where there is no marked resistance. Much as nature is said to abhor a vacuum, groups of organized men abhor and appear unable to tolerate unorganized communities. Consequently as long as there are two groups of men who are somewhat organized there will be points of friction where the boundaries or spheres of influence of one community rub against the other. The concept of territoriality as noted in lower echelons of the animal kingdom appears to be a general principle that applies to "turf" domination not only in "West Side Story" but in the world at large. One day, perhaps, it will also apply in the universe if other habitable worlds are discovered with creatures like ourselves who have expansive and controlling natures. Unless one of two communities in contact with each other is passive or voluntarily says to the other "Take me into your culture, I want to give up the security of my identity" (almost impossible to imagine) there will be conflict because a basic psychological need is to preserve one's identity. How many of us would willingly change sex, nationality, race, religion or any other characteristic that gives us our identity-no matter how miserable our immediate lot may be? Because of this basic psychological predilection it is clear that a threat to survival, apparent or real, will always remain. The Russians and Chinese and others no more want to be like Americans than vice versa. To deal effectively with this basic disposition and major cause of conflict certain behavioral and policy guidelines must be set forth clearly.

The behavioral guidelines are relatively simple in principle although at times difficult to adopt and implement. The guidelines are (1) we will fight to preserve our identity under threat of being devoured and (2) we will continually try to negotiate with the source of the threat to our physical survival in order to establish a reasonable state of peaceful coexistence. The policy guidelines are more difficult to establish. How do we determine when a threat to physical survival is real and significant? And where do we place the line where we are to make our stand? Obviously these questions are open to argument. One has to consider when making decisions about active and war-like interventions the chances of winning or at least continuing to be able to survive; whether or not the cost-moral, physical and economic-can be sustained; and whether the alternatives to fighting are acceptable to the majority of those affected.

Accepting these dismal (but not necessarily hopeless) guidelines to living in the real world, let me turn to the problem of developing an acceptable rationale for extricating ourselves from the present conflict and preventing ourselves